P.O. Box 305025 Montgomery, Alabama 36130-5025



Phone: (334) 242-5550 Fax: (334) 242-5555 www.hacr.alabama.gov

## **INSTRUCTOR APPLICATION**

## **SECTION A: INSTRUCTOR INFORMATION**

Instructor Requirements: (at least one of the following)

- 1. Found by the Board to have professional or trade experience or other special qualifications qualifying him/her to teach continuing education courses.
- 2. Display proven knowledge of the subject material.
- 3. A "qualified code enforcement official" with proven teaching experience.

Name of Instructor:	
Instructor Phone Number:	Email Address:
A letter of recommendation from the proprior teaching experience must be submit	ovider and resume reflecting expertise within his/her area of specialty and tted with application.
SECTION B: PROVIDER AND COURSE INFORMATION  The provider must be approved. If the provider has not been approved by the Board, you must submit form CE-1 along with this application.	
Mailing Address:	
Course Title(s) Requesting Approval to Te	each:
SECTION C: FEES	
Please submit \$25.00 along with this applicheck, money order, or credit card. (Maste	lication in order to be considered by the Board. Payments can be made by erCard and Visa only):
Card Number:	Expiration Date: